

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No 1215 0188  
Expires 11 30-2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U

2 Fiscal Year Covered From

1 / 1 / 04 Through 12 / 31 / 04

3 Name and address of person filing

Name MARK E ADKINS

P O Box Bldg Room No if any

Street 11501 W 68TH ST

City SHAWNEE

State KANSAS ZIP Code + 4 66203

4 Name file number and address of labor organization

Name LABORERS' L U 1290

Labor Organization File Number 023-463

P O Box Building and Room Number if any

Street 2600 MERRIAM LANE

City KANSAS CITY

State KANSAS ZIP Code + 4 66106

5 Position in labor organization

VICE President

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent

6 Name and address of Employer (including trade name if any)

Name J E DUNN CONSTRUCTION

Trade Name if any

P O Box Bldg Room No if any

Street 929 HOLMES

City KANSAS CITY

State MISSOURI ZIP Code + 4 64106

7 a Nature of Interest Transaction or Income

GOLF OUTING w/ CLIFF Larsen  
WALT DISNEY RESORT  
(FUND TRUSTEES)

7 b Amount.

\$140.00

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions)

Signed

*Mark E Adkins*

On

8/1/05

Date

19131432-1903

Telephone Number

Name of Person Filing	File Number U
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**B** Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

**8** Name and address of Business (including trade name if any)

Name Greater K.C. Laborers Training Fund

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street 8944 Kew Dr

City K.C.

State KS ZIP Code + 4 66111

**9** Business deals with

- ☐ a Labor Organization
- ☒ b Trust
- ☐ c Employer

**10** If 9 b or 9 c is checked give trust or employer's name

Name \_\_\_\_\_

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

**11 a** Nature of such dealing

Apprentice ship Graduation Dinner @ Argosy

**11 b** Approximate dollar value of such dealing

**12 a** Nature of interest held or income received

\_\_\_\_\_

**12 b** Amount

\$ 57.00

**C** Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

**13 a** Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name \_\_\_\_\_

Trade Name if any \_\_\_\_\_

P O Box Bldg Room No if any \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code + 4 \_\_\_\_\_

**14 a** Nature of payment

\_\_\_\_\_

**13 b** Is the Business an Employer ☐ or Consultant ☒ ?

**14 b** Amount of payment

\_\_\_\_\_

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Arnold, Newbold, Winter, Jackson P.C.Trade Name if any P O Box Bldg Room No if any Street 1125 Grand Blvd Suite 1600City K.C.State MO ZIP Code + 4 64106

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Greater K.C. Pension FundTrade Name if any P O Box Bldg Room No if any Street 6405 MetcalfCity OPState K.S. ZIP Code + 4 66202

## 11 a Nature of such dealing

Fund Council

## 11 b Approximate dollar value of such dealing

## 12 a Nature of interest held or income received

Golf outing w/ Mike Newbold  
@ Walt Disney resort  
\$140.00

## 12 b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State  ZIP Code + 4 

## 14 a Nature of payment

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

## 8 Name and address of Business (including trade name if any)

Name Arnold, Newbold, Winter, Jackson P.C.

Trade Name if any

P O Box Bldg Room No if any

Street 1125 Grand blvd. Suite 1600City K.C.State MO ZIP Code + 4 64106

## 9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

## 10 If 9 b or 9 c is checked give trust or employer's name

Name Greater K.C. Pension Fund

Trade Name if any

P O Box Bldg Room No if any

Street 6405 Metcalf Suite 200City Overland ParkState KS ZIP Code + 4 66202

## 11 a Nature of such dealing

Fund Council

## 11 b Approximate dollar value of such dealing

## 12 a Nature of interest held or income received

CHRISTMAS GIFT BOND

## 12 b Amount

\$ 50.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

## 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

## 14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

## 14 b Amount of payment.

**B** Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

**8** Name and address of Business (including trade name if any)Name Arnold, Newbold, WINTER, Jackson PC

Trade Name if any

P O Box Bldg Room No if any

Street 1125 Grand BlvdCity K.C.State MO ZIP Code + 4 64106**9** Business deals with☐ a Labor Organization☒ b Trust☐ c Employer**10** If 9 b or 9 c is checked give trust or employer's nameName Greater K C Pension Fund

Trade Name if any

P O Box Bldg Room No if any

Street 6405 METCAL Suite 200City Overland ParkState KS ZIP Code + 4 66202**11 a** Nature of such dealingFund Counsel**11 b** Approximate dollar value of such dealing**12 a** Nature of Interest held or income receivedCHRISTMAS party @ Harrah's hotel  
and casino  
Dinner 10.00  
Drinks 15.00**12 b** Amount25.00

**C** Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

**13 a** Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

**14 a** Nature of payment**13 b** Is the Business an Employer ☐or Consultant ☒ ?**14 b** Amount of payment

**ADDENDA TO THE LM-30 FROM WHICH IS TO BE  
INCORPORATED AND MADE PART OF THE LM-30 FROM**

**ADDENDUM A [UNSOLICITED GIFTS OR PROMOTIONAL ITEMS]**

On several occasions in 2004, I recall that I was given [a] complimentary promotional item[s], such as a clothing item, accessory or printed material w/ with LIUNA logo, etc ] At no time did I solicit such item[s], and they were sent to my office without my prior knowledge or authorization I did not retain possession of any of these items nor did any member of my family I have no knowledge as to the value of the item[s], and do not recall the manufacturer or provider of such [an] item[s]

**ADDENDUM B [UNSOLICITED HOLIDAY GIFTS]**

On several occasions in 2004, particularly during holiday seasons, I recall that I was given complimentary items, a [fruit basket, holiday turkey, holiday ham, gourmet foods, etc] At no time did I solicit such item[s], and it/they were sent to my office without my prior knowledge or authorization I did not retain possession of any of these items as I shared them with the individuals in my office My actions were in line with published Office of Government Ethics guidelines, which state, "When it is not practical to return a tangible item because it is perishable, the item may, at the discretion of the employee's supervisor or an agency ethics official, be given to an appropriate charity shared within the recipient's office or destroyed " C F R 2635 205

**ADDENDUM C [MEALS/EVENTS WITH FRIENDS]**

I have personal friendships with individuals who may be employed by reportable entities under the LMRDA, which exist separate and apart from my role as a union officer/employee In 2004, it is conceivable that I received the benefit of a meal, refreshment or social event from these individuals, which I did not report because I do not have any records of these personal encounters and/or have no specific recollection of any benefits received

**ADDENDUM D [MEAL/EVENTS WITHOUT SPECIFIC RECORDS OR  
RECOLLECTION]**

It is conceivable tat I received the benefit of a meal, refreshment or social event from an individual who may be employed by a reportable entity under the Labor Management Reporting and Disclosure Act, which I did not report because I do not have any records of these encounters and have no specific recollection of any benefits received

## **ADDENDUM E [UNION TO UNION BENEFITS]**

I am not reporting any benefits that I may have received in 2004 from labor organizations affiliated with the Laborers' International Union of North America ("LIUNA"), my employer, or other labor organizations. My understanding of guidance received by the AFL-CIO from the Department of Labor is that benefits received from LIUNA-affiliated labor organizations and other labor organizations are not reportable on the LM-30 report, and I am following that guidance.

August 10, 2005

U S Department of Labor  
Employee Standards Administration  
Office of Labor-Management Standards  
200 Constitution Ave, NW  
Washington, D C 20210

Re Form LM-30 Filing for Mark Adkins

Dear Sir or Madam

Enclosed is my Labor Organization Officer and Employee Report LM-30 for the 2004 reporting period. In filing the report, I have provided by best estimate or an estimated price range for the value of the benefit received where I have no knowledge as to an exact amount.

As you know, it was not until March of this year that the Department of Labor initially announced its intention to provide additional guidance to the reporting community concerning the LM-30 report, to seek systemic compliance with these requirements, and to apply standards adopted in 2005 retroactively to 2004 as a base year in that effort. Further, the Department's guidance to date on LM-30 reporting is still changing and remains uncertain in various particulars.

It may be possible that a covered employer or business not listed on my LM-30 report for 2004 provided something of value as to which I have no documentary record or any present specific recollection. In accordance with your guidance, it is my understanding that, in that circumstance, I am not required to take any further action.

This filing reflects my good faith effort to comply with the LM-30 reporting provisions and in doing so, I have relied upon the evolving guidance from the Department. The enclosed material represents my best recollection and estimate of all lawfully reported benefits that I received in 2004.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark Adkins', written over a horizontal line.

Mark Adkins